Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN	Attorney Docket Number First Named Inventor	PAQUETTE, N.			
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number				
Declaration Declaration	Filing Date				
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit				
Filing (37 ČFR 1.16 (e)) required)	Examiner Name				

As th below named inventor, I he	reby declare that:				
My residence, mailing address, and o	citizenship are as stated be	low next to my name.			
I believe I am the original and first inv	ventor of the subject matter	which is claimed and for	which a patent is sou	ght on the invention entitled:	
WASTE COLLECTION					
	(Title of the I	Invention)			
the specification of which is attached hereto		,			
is accorded to the					
OR was filed on (MM/DD/YYYY)		as United State	es Application Number	r or PCT International	
Application Number	and was amend	ded on (MM/DD/YYYY)		(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the Unit d States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attach d?	
		(MM/DD/YYYY)	Not Claimed	YES NO	
	1				
Additional foreign application num	mbers are listed on a supple	emental priority data sher	et PTO/SB/02B attach	ned hereto:	

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code				OR _] Con	respondence address below
Name		20 PATENT TRAD	7/9 DEMARK O	FFICE		
Addr ss			<u> </u>			
City			State)		ZIP
C untry	Tele	ephone		·		Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so walldity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		A petition h	as be	en filed for this u	ınsign	ned inventor
Nicole Giv n Name (first and middle [if any])			PAQUETTE Family Name or Surname			Ξ
Invent r's Signature Sieble Faguette						Date /0-7-2003
Gatineau City		Quebec		CANADA		Canadian
R sid nce: City		State	!	Country		Citizenship
Mailing Address 18 rue St-Alexandre	_					
Gatineau		Quebec		J8V1B1		CANADA
City		State		ZIP		Country
NAME OF SECOND INVENTOR:	<u>_</u>	A petition has	s been	filed for this uns	signed	d inventor
Giv n Name (first and middle [if any])			Family or Surn			
Inv ntor's Signature						Date
R sidence: City		State		Country		Citizenship
Mailing Addr ss	_ _г					
City		Stat		ZIP		Country
Additional inventors are being nam d on the	_supp	lemental Additior	nal Inver	ntor(s) she t(s) PTO)/SB/02	2A attached hereto.

PTO/SB/81 (06-03)

Approved for use through 11/30/2005, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

ired to respond to a collection of inf	ormation unless it displays a valid OMB control number.
Application Number	
Filing Date	
First Named Inventor	PAQUETTE, N.
Title	Waste Collection Feeders
Art Unit	
Examiner Name	
Attorney Docket Number	1627P01US01

I hereby appoint:					
X Practitioners at Customer Number:					
OR	20779				
Practitioner(s) named below:	PATENT TRADEMARK OFFICE				
Name			Registration	Number	
as my/our attorney(s) or agent(s) to prosec Trademark Office connected therewith.	ute the application identified above, ar	nd to trans	sact all business	in the Ur	nited States Patent and
Please recognize or change the correspond		l applicatio	on to:		
The above-mentioned Customer I	Number:				
OR					
The address associated with Cus	stomer Number:				
	ı		i		
OR	<u> </u>				
OR Firm or Individual Name					
Firm or Individual Name Address					
Firm or Individual Name Address Address					
Firm or Individual Name Address Address City		State		Zip	
Firm or Individual Name Address Address City Country				Zip	
Firm or Individual Name Address Address City Country Telephone		State		Zip	
Firm or Individual Name Address Address City Country Telephone				Zip	
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire integral of the content of the entire integral	terest. See 37 CFR 3.71			Zip	
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor.	terest. See 37 CFR 3.71	Fax	ecord	Zip	
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire int Statement under 37 CFR 3.73(b) is Name Nicole PAOWATE.	terest. See 37 CFR 3.71. is enclosed. (Form PTO/SB/96)	Fax	ecord	Zip	
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire interest of the statement under 37 CFR 3.73(b) in the statement under 37 CFR 3.73(b) i	terest. See 37 CFR 3.71. is enclosed. (Form PTO/SB/96)	Fax	ecord	Zip	
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire int Statement under 37 CFR 3.73(b) is Name Nicole PAOWATE.	terest. See 37 CFR 3.71. is enclosed. (Form PTO/SB/96)	Fax	ecord Telephone		568 5105
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire int Statement under 37 CFR 3.73(b) is Name Nicole PAQUATTE Signature	terest. See 37 CFR 3.71. s enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignment of Applica	ax gnee of Re	Telephone	819	

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.